

PROGRESS SHEET – APPLICATION FOR CHANGE/TRANSFER

SUBJECT TO REAL ESTATE EXCISE TAX? YES ☐ NO ☒

NAME: **Isaak Land, Inc.**

Philip Isaak
P.O. Box 953
Coulee City, WA 99115

509-632-5544

Copies scanned & e-mailed to Department of Revenue:

Date: _____

Initial: _____

Chg. Application ROE/ROD Assignment

Rejected 3rd Feb 2012

☐ ASSIGNED (SEE BACK OF PAGE)

APP. NO. 3111	PERMIT NO. 2813	CERT. NO. 1476-A	CERT. OF CHANGE NO(S)
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GRANT COUNTY

WRIA

42

WRTS No. **CG3-*03111C**

ID No. 4625157

PURPOSE OF APPLICATION: **Add four wells & Change the Place of use**

Date Application received: **April 14, 2009**

Date fee received: **April 14, 2009**

Amount: **\$50.00**

Statement of additional exam sent: **4/15/2009**

Date fee received: **April 21, 2009**

Amount: **\$16.67**

Returned for completion or correction:

Received:

☐ Application mapped by: _____ date: _____

☐ SPOTTED

PUBLICATION:

Newspaper: **Coulee City News-Standard**

OK'd by: _____

Date Notice Sent _____

Date Affidavit received: _____

Time expires: _____

Checked by: _____

Date: _____

☐ Protests: _____

☐ Fee rcvd _____

FIELD EXAMINATION REQUIRED:

YES ()

NO ()

Examination by: _____ date: _____

☐ ROE map checked by: _____ date: _____

BC due: _____

BC rcvd: _____

ext: _____

CC due: _____

CC rcvd: _____

ext: _____

PA due: _____

PA rcvd: _____

ext: _____

PA FIELD EXAMINATION REQUIRED – DATE: _____ BY: _____

Date OK'd for CHANGE/TRANSFER: _____ By: _____

☐ Chg-ROE map checked by: _____ Date: _____

*Statement of Fee Sent: _____ Fee Received: _____

*Cert. Of Change ONLY

Date CHANGE ROE ISSUED: _____ No. _____

Change/Transfer Application to be processed by **County Water Conservancy Board**

ROD received: 45 day review period ends: Review Period Extended to: Ecy Decision Mailed:

Date mailed to interested parties:

☐ WDFW ☐ State DOH ☐ County DOH ☐ Tribe

☐ W²FO ☐ EhrataFO ☐ Other

cc:

ASSIGNMENT INFO:**SUBJECT TO REAL ESTATE EXCISE TAX****Assignment received:** _____**Assignment approved:** _____

Assignee: _____

Address: _____

Phone #: _____

☐ Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue

Date: _____

Initial: _____

Assignment received: _____**Assignment approved:** _____

Assignee: _____

Address: _____

Phone #: _____

☐ Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue

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Initial: _____

Assignment received: _____**Assignment approved:** _____

Assignee: _____

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Assignment received: _____**Assignment approved:** _____

Assignee: _____

Address: _____

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